



Lung-MAP Frequently Asked Questions

CIRB Questions

Do we need to make separate submissions to the CIRB to open each LUNGMAP sub-study at our site?

Yes. The study structure considers the studies as standalone trials for regulatory purposes. A separate Study-Specific Worksheet (SSW) is required for each of the studies: LUNGMAP and each active sub-study.

Should we submit a Study Specific Worksheet as soon as each LUNGMAP sub-study is activated?

The CIRB allows sites to either submit a Study Specific Worksheet (SSW) as soon as a study is activated or wait to submit an SSW until a participant is assigned to that sub-study. Although the choice is up to the site, it is recommended to open sub-studies as soon as a study is activated to reduce delay of registering a participant. Regardless of the choice made, it is the responsibility of the sites to utilize the most current version of the protocol and consent.

If our site already had S1400 open with the NCI CIRB and we want to open LUNGMAP, do we have to open LUNGMAP and the new sub-studies with the CIRB?

Yes. The LUNGMAP screening protocol is a separate study from the S1400 screening protocol. The study structure considers each new sub-study a standalone trial, requiring separate CIRB applications.

Does each Lung-MAP study have different IRB numbers?

The CIRB does not use unique IRB numbers. The CIRB utilizes the Group's study number or naming convention, such as S1900E.

Are there separate CIRB approval dates for the LUNGMAP screening protocol and sub-studies?

Yes. Each study may have separate approval dates, as each study can be reviewed and approved separately by the CIRB.

How are CIRB Continuing Reviews for the LUNGMAP screening protocol and each sub-study processed?

The LUNGMAP screening protocol and its sub-studies are conducted under SWOG IND 143217 and the CIRB. The LUNGMAP screening protocol is considered a single study under one IND, consisting of the screening protocol and multiple sub-studies. Each sub-study protocol operates independently and has its own version date. For CIRB Continuing Reviews, LUNGMAP and its sub-studies will be processed separately but have the same expiration date as the LUNGMAP screening protocol.



How are amendments handled by the CIRB?

There are separate amendments for the LUNGMAP screening protocol and each sub-study.

Regulatory Questions

Where can the current regulatory status of each Lung-MAP study be found?

Please check the protocol status on the CTSU website. For an overall view of which Lung-MAP studies are active, temporarily closed, permanently closed, or in development, please refer to the trial schema located here:

https://lung-map.org/wp-content/uploads/Lung-MAP_Schema.pdf?gl=1*1m701xb*ga*NDQwMTQ4NTE1LjE2ODkxNzA1ODQ.*ga_K5D9E733CE*MTY5Mjg4MjE3MC42LjEuMTY5Mjg4MjE3My4wLjAuMA..&ga=2.31123519.1609091180.1692882171-440148515.1689170584

Our local IRB requires having updated Investigator Brochures (IB) on file. How do we obtain new IBs?

Lung-MAP sub-study investigational agents are provided under an IND held by SWOG. For INDs filed by SWOG, the protocol serves as the IB. In such instances, submission of the protocol to the IRB should suffice for providing the IRB with information about the drug.

However, in cases where the local IRB requires having updated IBs on file, requests may be submitted to the CTSU website by completing the CTSU Request for Clinical Brochure Form available under the study's CTSU protocol page > Documents > Pharmacy Tab. The completed form is submitted via the CTSU Regulatory Submission Portal.

Do we have to process a protocol amendment after a study is closed?

This depends on the type of protocol amendment. Please refer to the memorandum released with the amendment for instructions. If there were never any patients registered to the study and the study is now permanently closed, then you do not need to process the amendment and you may write a note-to-file stating this reason.

What are the accrual credits and payments for the LUNGMAP screening protocol and each sub-study?

Sites receive reimbursement credits for enrollment on the LUNGMAP screening protocol and enrollment on a sub-study. Please refer to the LUNGMAP and sub-study specific Funding Sheets for additional information. The Funding Sheets are available on the CTSU (<https://www.ctsu.org>) website. Please contact funding@SWOG.org with any questions.

What are the accrual credits toward SWOG membership for the LUNGMAP screening protocol and each sub-study?



Enrollment on the **LUNGMAP** screening protocol Step 1 is 0.25 credits and enrollment to a sub-study is 1 credit toward SWOG membership.

Training Requirements

What are the training requirements?

Per the protocol, one member of each institution (CRA or investigator, etc.) must complete the Protocol Specific Requirements (PSR) prior to participant registration. The PSR will need to be renewed prior to participant registration each time a new sub-study has been added.

The PSR can be satisfied by completing the training online and submitting the verification at: <https://www.swog.org/required-lung-map-training>.

To receive credit, submit a saved copy or printout of the training verification form via the CTSU Regulatory Submission Portal. The research staff member who completes the training can include all the CTEP institution ID codes they are associated with (i.e., TX123). For example, a head site may include the CTEP institution ID codes from the multiple satellite sites in the training verification form. The SWOG Protocol Coordinator and CTSU will be notified of completion.

Where can I find resources to learn more about Lung-MAP?

- Protocol Pages on CTSU
<https://www.ctsu.org>
- Resources on CTSU **LUNGMAP** screening protocol page under Documents > Education and Promotion:
 - **LUNGMAP** Tissue Specifications Sheet
 - Detailed and High-Level Logistical Schemas
- Lung-MAP Schema and Sub-Study Status Updates
https://lung-map.org/wp-content/uploads/Lung-MAP_Schema.pdf?_gl=1*1m701xb*_ga*NDQwMTQ4NTE1LjE2ODkxNzA1ODQ.*_ga_K5D9E733CE*MTY5Mjg4MjE3MC42LjEuMTY5Mjg4MjE3My4wLjAuMA..&_ga=2.31123519.1609091180.1692882171-440148515.1689170584
- Lung-MAP Training
<https://www.swog.org/required-lung-map-training>
- This FAQ document, also listed on the SWOG Lung-MAP Training page
<https://www.swog.org/required-lung-map-training>
- Lung-MAP Group Meeting Materials
<https://www.swog.org/lung-map-group-meeting-materials>
- Resources on SWOG Lung-MAP Website: <https://www.swog.org/lung-map-s1400-resources>
 - Data Submission Guidelines
 - Guidance on FDA Inspection
 - Sample Documents for Site Use
 - Lung-MAP Sub-Study Reference Table
 - **S1900G** FAQ document

Opening Sub-Studies at the Site

Is it required to open all **LUNGMAP** sub-studies?



No. Sites do not have to participate in all sub-studies. However, it is strongly advised to do so, in order to provide participants as many treatment options as possible.

Does the LUNGMAP screening protocol need to be open at our site in order for participants on the legacy S1400 screening protocol to be registered to LUNGMAP sub-studies (i.e., S1900E)?

Yes. The LUNGMAP screening protocol must be open at the site for regulatory purposes before participants on S1400 can be registered to the newer sub-studies. Please note that S1400 participants do not have to re-screen on the LUNGMAP screening protocol.

Closing Studies with the IRB

Can we close a study out with our IRB of record?

Please contact LUNGMAPquestion@crab.org to verify all required items have been met before closing a Lung-MAP study at your IRB.

- Sites that registered participants to a Lung-MAP sub-study should keep that sub-study open with your IRB of record until the definitive manuscript for the sub-study has been published, all participants have completed follow-up and all data entry queries and expectations have been resolved. In addition, if any S1400 participants registered to a sub-study, S1400 should remain open at the IRB until the definitive manuscript(s) for those sub-studies have been published.
- Sites that never registered participants to S1400 and do not intend to open LUNGMAP may close S1400 with their IRB of record.
- Sites that never registered participants to a particular sub-study may close that sub-study with their IRB of record.
- If a study is listed on the No Required Follow-Up list (located here: <https://txwb.crab.org/TXWB/ReportNOFU.aspx>), sites may close the study with their IRB of record.

Common Sub-Study Eligibility Criteria

What are the general sub-study eligibility criteria across Lung-MAP sub-studies?

As the Lung-MAP umbrella trial has evolved, the eligibility criteria for each treatment sub-study have become more unique. Please note that although there are some general common eligibility criteria across Lung-MAP sub-studies, the eligibility criteria vary between sub-studies and sites must refer to Section 5.0 of the sub-study protocol for specific criteria. Below are some general eligibility criteria to keep in mind when considering potential participants.

Disease Related Criteria

- Participants must have confirmed Stage IV or recurrent non-small cell lung cancer. (See sub-study protocol specific requirements, as some sub-studies may be for participants with squamous or non-squamous NSCLC only.)



- Participants must have measurable or non-measurable disease (see Section 10 of the sub-study protocols) documented by CT or MRI. Measurable disease must be assessed within **28 days** prior to randomization. Non-measurable disease must be assessed within **42 days** prior to randomization. The CT from a combined PET/CT may be used only if it is of diagnostic quality as defined in Section 10. All known sites of disease must be assessed and documented on the Baseline Tumor Assessment Form (RECIST 1.1). See Sections 15.0 and Section 18.0 of sub-study protocols for guidelines and submission instructions for required central radiology review. (See sub-study protocol specific requirements, as **some sub-studies may be for participants with measurable disease only.**)
- Participants must have a CT or MRI scan of the brain to evaluate for CNS disease within **42 days** prior to sub-study registration.

Prior/Concurrent Therapy Criteria

- Participants must have progressed (in the opinion of the treating physician) following the most recent line of therapy.
- Participants must not have received any prior systemic therapy (systemic chemotherapy, immunotherapy, or investigational drug) within 21 days prior to sub-study registration. (See sub-study protocol specific requirements, as **some sub-studies have different washout requirements.**)
- Participants must have recovered (\leq Grade 1) from any side effects of prior therapy. (See sub-study protocol specific requirements for any exceptions.)
- Participants must not be planning to receive any concurrent chemotherapy, immunotherapy, biologic or hormonal therapy for cancer treatment while receiving treatment on the sub-study.

Clinical/Laboratory Criteria

- Participants' most recent Zubrod performance status must be 0-1 and be documented within **28 days** prior to sub-study registration.
- Participants must not have any Grade III/IV cardiac disease as defined by the New York Heart Association Criteria (i.e., participants with cardiac disease resulting in marked limitation of physical activity or resulting in inability to carry on any physical activity without discomfort), unstable angina pectoris, and myocardial infarction within 6 months, or serious uncontrolled cardiac arrhythmia (see Appendix 18.1 of sub-study protocols).
- Participants must not have a prior or concurrent malignancy whose natural history or treatment has the potential to interfere with the safety or efficacy assessment of the investigational regimen.

[Using previous Commercial FoundationOne CDx reports for LUNGMAP](#)

If a participant previously had Foundation Medicine testing done, can these results be used to enroll a participant on a sub-study?

Yes, if FoundationOne CDx testing was done outside of LUNGMAP (i.e. commercially by a treating physician), it can be used for sub-study assignment. The participant must be registered to the **LUNGMAP** screening protocol and a request for reanalysis of the commercial FoundationOne CDx results must be submitted in Specimen Tracking System (see LUNGMAP Section 15.2). Note: The commercial FoundationOne CDx results must be from solid tumor tissue (liquid test not allowed) and the original report



date must be on or after September 1, 2019. All participants requesting to use/reanalyze commercial FoundationOne CDx results on **LUNGMAP** must be consented using the protocol version date 3/1/21 or later.

What does it mean for commercial FoundationOne CDx results to be reanalyzed?

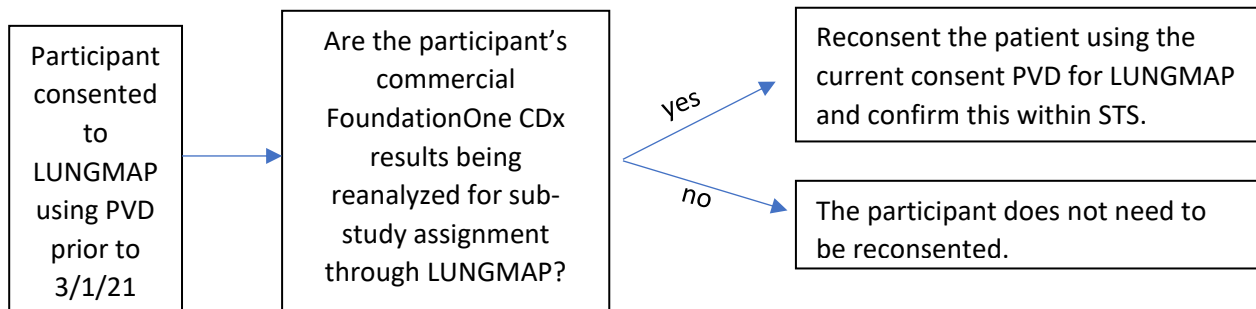
The results on the original commercial report are not “copy and pasted”. Instead, Foundation Medicine, Inc. (FMI) will use the participant’s raw sequencing data and reanalyze it. This ensures that the most recent and scientific technological advances are incorporated into the participant’s results for enrollment on LUNGMAP. It also allows for any Lung-MAP-specific programming, such as biomarker definitions, to be applied to the results.

Will the registering site receive additional FMI reports when a participant’s results are reanalyzed?

No, the site will not receive any reports, as the original ordering physician will have received the previous commercial report from FMI. Results from the reanalysis of the participant’s commercial FoundationOne CDx testing will be delivered to the SWOG Statistical and Data Management Center via the typical LUNGMAP process. If the participant’s NGS results are updated due to the reanalysis of the data, the original ordering physician will receive an updated, amended report, from FMI.

Does the participant need to be reconsented to use their commercial FoundationOne CDx results?

The participant must sign the consent version date 3/1/21 or later to use commercial previous FoundationOne CDx results on LUNGMAP. This version of the consent specifically authorizes Foundation Medicine Inc. to release the commercial testing results to SWOG. If they were consented to LUNGMAP prior to this Protocol Version Date (PVD), the patient must be reconsented under the current LUNGMAP consent, only if they are requesting their commercial FoundationOne CDx results be reanalyzed and used for sub-study assignment.



Where can I find more information about using commercial FoundationOne CDx results to register a patient to LUNGMAP?

More information regarding this is available on the Lung-MAP Training website. <https://www.swog.org/required-lung-map-training>



Eligibility and Data Submission Questions

Can participants screened on S1400 be assigned to LUNGMAP sub-studies?

Yes. Participants who screened on S1400 may potentially be assigned to LUNGMAP sub-studies.

If a participant previously had Foundation Medicine testing done on the S1400 screening protocol, can these results be used to enroll a participant on a newer LUNGMAP sub-study (i.e., S1900E)?

If the participant was registered to S1400 and tissue testing was performed through the study, the participant should not be re-registered to LUNGMAP and will not need to submit additional tissue. We will do our best to assess all previously registered participants (on S1400 as well as LUNGMAP) for the biomarkers involved in any new sub-studies that open up. This may depend on the specific sub-study and biomarkers involved.

If we are not able to activate a sub-study at the time a participant is assigned (i.e., logistical issues with pharmacy), can the participant be assigned to a different sub-study?

Yes. Please complete the Request for Sub-Study Reassignment form located in Rave in the participant's screening study (S1400 or LUNGMAP). Please note that once re-assigned, participants cannot be assigned back to a sub-study to which they were previously assigned. Please use this option only when necessary. See timing between assignment and registration below.

What is the timing between sub-study assignment and registration?

There is no time limit between when the participant receives sub-study assignment and when they can be registered to the sub-study, as long as the participant meets eligibility requirements at the time of registration, and the sub-study remains open to accrual.

What if a LUNGMAP participant with successful biomarker profiling is not eligible or does not have a biomarker for any active sub-studies?

LUNGMAP participants who do not meet the eligibility requirements for any of the actively accruing Lung-MAP sub-studies may be considered for future sub-studies as they become available (even if the Notice of Intention not to Register was previously submitted). For biomarker-driven sub-studies that open in the future, the site will receive an email if the patient is found to be a candidate based on their biomarker profiling results. If a patient is not eligible for a biomarker-driven sub-study, the site will receive notice when a non-match sub-study is open to accrual and the participant can be assigned to that sub-study at that time.

Can starter kits for the ctDNA testing be requested in advance?

No; however, please note that a patient ID number is not required to order a kit.

How long will it take to receive a ctDNA kit from Foundation Medicine?

Kits will arrive within 3 days after ordering (excluding weekends and holidays). The best way to request a kit is to contact FMI via email at lung.map@foundationmedicine.com. Please refer to Section 15.0 of the applicable Lung-MAP study protocol for complete instructions.



Can ctDNA and tissue specimens be shipped to Foundation Medicine on Fridays?

Yes. Please mark Friday shipments for next day delivery. FMI accepts Saturday deliveries.

[Contact Information](#)

Eligibility, specimen, or data submission questions – LUNGMAPquestion@crab.org

General protocol, consent, or regulatory questions – protocols@swog.org

Treatment-related questions – SXXXXXMedicalQuery@swog.org (i.e., S1900EMedicalQuery@swog.org)

General medical questions about Lung-MAP overall – LUNGMAP@swog.org

Site Coordinators Committee – LUNGMAPSCC@crab.org

Funding questions – Funding@swog.org

Quality Assurance & Auditing – QAMail@swog.org

Central Monitoring – CentralMonitorQuestion@crab.org